



SECTION 11 – LOCAL GOVERNMENT RATES AND OTHER MATTERS ACT 2019

PART 1 - RELEVANT PROPERTY DETAILS

'' denotes a mandatory field*

* Valuation Office Property ID Number:

or

* Rate Number(s): *

* Address of Property:

DED:
Townland:
Lot No:

PART 2 - NATURE OF TRANSACTION (please tick one of the boxes below)

Note:- *Parts 1,2,3,4 and 10 of the form to be completed in all cases
Parts 5, 6, 7, 8, 9 to be completed based on the Nature of the Transaction*

*** Type:**

- Sale: Please complete Parts 3, 4 and 5
- Lease: Please complete Parts 3, 4 and 6
- Sublet: Please complete Parts 3, 4 and 6
- Licence: Please complete Parts 3, 4 and 6
- Receivership: Please complete Parts 3, 4 and 7
- Liquidation: Please complete Parts 3, 4 and 7
- Other (Please State): Please complete Parts 3, 4 and 8 *or* 9

* Date of Transaction: / / (dd/mm/yyyy)

If Lease/Sublet/Licence:

* Period from: / / (dd/mm/yyyy)
* Period To: / / (dd/mm/yyyy)



PART 3 - CURRENT OWNER DETAILS

(Prior to the date of transaction (Vendor/Lessor) and person submitting the notice of assignment)

* Legal Name:

* Trading Name:
(If different from Legal Name)

* Correspondence Address:
(if different from address of property (Part1))

* PPSN or Tax Number:
or

* Company Registered No:

* Telephone:

* Mobile:

* Email:

* Contact Name:

* Position:



PART 4 - CURRENT OCCUPIER'S DETAILS, ONLY IF DIFFERENT TO PART 3

(Prior to the date of transaction)

* Legal Name:

* Trading Name:

(If different from Legal Name)

* Correspondence Address:

(If different from address of property (Part1))

* PPSN or Tax Number:

or

* Company Registered No:

* Telephone:

* Mobile:

* Email:

* Contact Name:

* Position:

* Period of Occupation: * Date of Commencement

* Date of Departure

* Forwarding Address:



PART 5 - NEW OWNER DETAILS (IF PROPERTY SOLD)

*** Type:**

(Tick appropriate Box)

Owner

Occupier

Both

* Legal Name:

* Trading Name:

(If different from Legal Name)

Correspondence Address:

(If different from address of property (Part1))

* PPSN or Tax Number:

Or

* Company Registered No:

* Telephone:

* Mobile:

* Email:

* Contact Name:

* Title/Position:



PART 6 - NEW OCCUPIER DETAILS

* Legal Name:

* Trading Name:

(If different from Legal Name)

* Correspondence Address:

(If different from address of property (Part1))

* PPSN or Tax Number:

or

* Company Registered No:

* Telephone:

* Mobile:

* Email:

* Date of Lease: / / dd/mm/yyyy

* Contact Name:

* Title/Position:

* Residential Address:

(If different from correspondence Address.)



PART 7 - RECEIVER/LIQUIDATOR DETAILS

* Legal Name:

* Trading Name:
(If different from Legal Name)

(Correspondence Address:

* Telephone:

* Mobile:

* Email:

* Date of Appointment: / / dd/mm/yyyy

* Contact Name:

* Position:

PART 8 - PREMISES BECOME VACANT

* Date Occupier left Premises: / / dd/mm/yyyy

* Premises being advertised for Lease / Let: Y/N

or

* Other: (Supporting documentation to be attached)

* Details of Auctioneer / Letting Agent:



PART 9 - PREMISES CLOSED FOR REDEVELOPMENT / MAJOR OVERHAUL

- * Date Premises Closed: / / dd/mm/yyyy
- * Planning Application Reference Number (if applicable):
- * Estimated Date of Completion: / / dd/mm/yyyy

PART 10 - DECLARATION

I hereby declare and affirm that I am the owner of the above specified property and the person required to notify the Local Authority in accordance with the provisions of Section 11 of the Local Government Rates & Other Matters Act 2019.

I declare that the details furnished above are true, accurate, correct and complete to the best of my knowledge and belief and I undertake to inform you of any necessary changes therein immediately in the event that I become aware of any matter which would alter this belief.

I understand that I am obligated by law to pay all rates that I am liable for at the date of transfer of the property

Signed:

Print Name:

Date: / / dd/mm/yyyy

Please return completed and signed form to the address below:

Commercial Rates Department
Waterford City & County Council
Civic Offices- Dungarvan, Co. Waterford
OR
Commercial Rates Department
Waterford City & County Council
City Hall, The Mall, Waterford